

Attorney Docket no: 0553-322.01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Applicat	tion of:)	
Shunpei YAMAZAKI))	I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on
Serial No.: 10/706,357)	
Filed:	November 12, 2003)) }	Ougust 1/2, 2004 (Date of Deposit)
	nermal Treatment Equipment And Method) or Heat-Treating		Shannon Wallace Name of applicant, assignee, or Registered Rep.
Examiner:	A. Ghyka))	Signature Date
Art Unit:	2812	<i>)</i>)	

ELECTION AND AMENDMENT B

Sir:

Commissioner for Patents

Alexandria, VA 22313-1450

P.O. Box 1450

In response to the Restriction Requirement of July 20, 2004, Applicant elects to prosecute Group II: Claims 28-36 in the above-identified application.

Applicant is making this election and withdrawing the non-elected claims without prejudice to later filing a divisional application on the non-elected claims.

Please also amend the above-identified application as follows:

9/02/2004 GSTANLEY 00000001 501039 10706357 1 FC:1201 172.00 DA 2 FC:1202 90.00 DA

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REMARKS

Applicant is amending claims 28 and 32 to correct a minor error therein.

Applicant is also adding new Claims 37-44. Please charge our Deposit Account No. 50-

1039 for any fee due for these new claims.

Favorable consideration is earnestly solicited.

Respectfully submitted,

Date: August 16, 2004

Registration No. 34,225

COOK, ALEX, McFARRON, MANZO, CUMMINGS & MEHLER, LTD.
200 West Adams Street
Suite 2850
Chicago, Illinois 60606
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PATENT APPLICATION FEE DETERMINATION RECORD 706357 10 Effective October 1, 2003 OTHER THAN **CLAIMS AS FILED - PART I** SMALL ENTITY SMALL ENTITY OR TYPE [(Column 2) (Column 1) FEE RATE FEE RATE TOTAL CLAIMS 770.00 BASIC FEE 385.00 BASIC FEE OR NUMBER EXTRA NUMBER FILED FOR X\$18= X\$ 9= TOTAL CHARGEABLE CLAIMS OR minus 20= X86* X43= minus 3 = OR INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PRESENT +290= +145= OR * If the difference in column 1 is less than zero, enter "0" in column 2 OR TOTAL TOTAL OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY SMALL ENTITY OR (Column 2) (Column 3) (Column 1) ADDI-ADDI-HIGHEST CLAIMS PRESENT TIONAL NUMBER RATE RATE TIONAL REMAINING **EXTRA PREVIOUSLY** 19/04 FEC AFTER FEE AMENDMENT PAID FOR AMENDMENT X\$18= 90. 5. 20 X\$ 9= OR 25 Minus ** Total 172 25 X86= Minus X43= OR Independent n FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR TOTAL 242 TOTAL OR ADDIT. FEE ADDIT, FEE (Column 2) (Column 3) (Column 1) ADDI-HIGHEST ADDI-CLAIMS PRESENT TIONAL NUMBER RATE REMAINING TÍONAL RATE 8 PREVIOUSLY EXTRA: FEE AFTER FEE NDMENT PAID FOR AMENDMENT X\$18= X\$ 9= OR Minus Total . X86= AME Minus X43= OR Independent FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +290= +145= OR TOTAL TOTAL OR ADDIT, FEE ADDIT. FEE (Column 3) (Column 2) (Column 1) ADDI-ADDI-HIGHEST CLAIMS PRESENT TIONAL NUMBER TIONAL REMAINING RATE ပ RATE PREVIOUSLY **EXTRA** FEE AFTER AMENDMENT FEE PAID FOR AMENDMENT X\$18= X\$ 9= OR Minus Total Minus X86= Independ nt X43= OR

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

OR

OR

+1.45=

TOTAL

+290=

ADDIT. FEE

TOTAL

Application or Docket Number